

| UNITED STATES DISTRICT COURT<br>NORTHERN DISTRICT OF CALIFORNIA<br>CAND 435<br>(CAND Rev. 08/2018)  |                  | TRANSCRIPT ORDER<br>Please use one form per court reporter.<br><i>CJA counsel please use Form CJA24</i><br>Please read instructions on next page. |  |   |                                  |   |                       |                       |  | COURT USE ONLY<br><b>DUE DATE:</b> |                       |                       |                                  |                       |                       |
|---|------------------|---|--|---|----------------------------------|---|-----------------------|-----------------------|--|------------------------------------|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|
| 1a. CONTACT PERSON FOR THIS ORDER<br><b>Linda Tam</b>   |                  |   | 2a. CONTACT PHONE NUMBER<br><b>(415) 395-8082</b>  |   |                                  | 3. CONTACT EMAIL ADDRESS<br><b>Linda.Tam@lw.com</b>     |                       |                       |  |                                    |                       |                       |                                  |                       |                       |
| 1b. ATTORNEY NAME (if different)<br><b>Sadik Huseny</b>   |                  |   | 2b. ATTORNEY PHONE NUMBER<br><b>(415) 395-8116</b>   |   |                                  | 3. ATTORNEY EMAIL ADDRESS<br><b>Sadik.Huseny@lw.com</b> |                       |                       |  |                                    |                       |                       |                                  |                       |                       |
| 4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE)<br>Latham & Watkins LLP<br>505 Montgomery Street, Suite 2000<br>San Francisco, CA 94111       |                  |   |  | 5. CASE NAME<br><b>Buffin, et al. v. City and County of SF, et al.</b>  |                                  |   |                       |                       | 6. CASE NUMBER<br><b>15cv04959YGR</b>  |                                    |                       |                       |                                  |                       |                       |
| 7. COURT REPORTER NAME ( FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR<br><b>Raynee Mercado</b>                                     |                  |   |  | 8. THIS TRANSCRIPT ORDER IS FOR:<br><input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached)<br><input type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL      CJA: <u>Do not use this form; use Form CJA24.</u> |                                  |   |                       |                       |  |                                    |                       |                       |                                  |                       |                       |
| 9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type: |                  |   |  |   |                                  |   |                       |                       |  |                                    |                       |                       |                                  |                       |                       |
| a. HEARING(S) (OR PORTIONS OF HEARINGS)   |                  |   |  | b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)  |                                  |   |                       |                       | c. DELIVERY TYPE (Choose one per line) |                                    |                       |                       |                                  |                       |                       |
| DATE  | JUDGE (initials) | TYPE (e.g. CMC)   | PORTION<br>If requesting less than full hearing,<br>specify portion (e.g. witness or time) | PDF (email)   | TEXT/ASCII (email)               | PAPER   | CONDENSED (email)     | ECF ACCESS (web)      | ORDINARY (30-day)                      | 14-Day                             | EXPEDITED (7-day)     | 3-DAY                 | DAILY (Next day)                 | HOURLY (2 hrs)        | REALTIME              |
| 09/03/2019  | YGR              | Motion  | Full Hearing   | <input checked="" type="radio"/>  | <input checked="" type="radio"/> | <input type="radio"/>                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|   |                  |   |  | <input type="radio"/>   | <input type="radio"/>            | <input type="radio"/>                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> |
|   |                  |   |  | <input type="radio"/>   | <input type="radio"/>            | <input type="radio"/>                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> |
|   |                  |   |  | <input type="radio"/>   | <input type="radio"/>            | <input type="radio"/>                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> |
|   |                  |   |  | <input type="radio"/>   | <input type="radio"/>            | <input type="radio"/>                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> |
|   |                  |   |  | <input type="radio"/>   | <input type="radio"/>            | <input type="radio"/>                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> |
| 10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:  |                  |   |  |   |                                  |   |                       |                       |  |                                    |                       |                       |                                  |                       |                       |
| ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).                                    |                  |   |  |   |                                  |   |                       |                       |  | 12. DATE                           |                       |                       |                                  |                       |                       |
| 11. SIGNATURE<br><b>/s/ Sadik Huseny</b>  |                  |   |  |   |                                  |   |                       |                       |  | 10/16/2019                         |                       |                       |                                  |                       |                       |

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